PTO/SB/31 (09-08)
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to be collection of information unless it displays a valid DMP patent.

NOTICE OF APPEAL FROM THE EXAMINER TO Docket Number (Optional)		
THE BOARD OF PATENT APPEALS AND INTERFERENCES		2000874.00153US1
I I	e Application of ad BOWMAN et al.	
Apr	olication Number	Filed
	10/624,098-Conf. #6122	July 21, 2003
For PERSONALIZED HEALTH COMMUNICATION SYSTEM		
Art	Unit	Examiner
	3626	K. K. Rapillo
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown		
above is reduced by half, and the resulting fee is:		
A check in the amount of the fee is enclosed.		
Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account.		
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 08-0219 .		
A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.		
WARNING: INFORMATION ON THIS FORM MAY BECOME PUBLIC. CREDIT CARD INFORMATION SHOULD NOT BE INCLUDED ON THIS FORM. PROVIDE CREDIT CARD INFORMATION AND AUTHORIZATION ON PTO-2038.		
I am the applicant /inventor.		Ser. S (. Ol
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		Signature Eric L. Prahl Typed or printed name
x attorney or agent of record.		
Registration number 32,590	***************************************	(617) 526-6000
attorney or agent acting under 37 CFR 1.34.		Telephone number
Registration number if acting under 37 CFR 1.34.		April 16, 2009 Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		
*Total of 1 forms are su	bmitted.	